

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>L. M. C.</i>		<i>6-6-01</i>
O.I.P.E. CLASSIFIER		<i>51</i>	<i>6-6-01</i>
FORMALITY REVIEW	<i>MM</i>	<i>572</i>	<i>07-27-01</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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*9/10/01*  
*9/10/01*